



PERU STATE COLLEGE
PERFORMANCE EVALUATION 2016 - 2017
Support Staff - NAPE

Employee Name:

Title:

Department:

Type of Report: Annual (April 1 to March 31) Due in HR each year before April 20th.
 End of Probationary Period - Due in HR **prior** to end of probationary period
 Special

PERFORMANCE RATINGS:

Exceeds Expectations (E). Performance in relation to job responsibilities and the demonstration of basic competencies **fully meets and exceeds** that normally expected by the supervisor of an employee with in the stated job.

Satisfactory (S). Performance in relation to job responsibilities and the demonstration of basic competencies **fully meets** that normally expected by the supervisor of an employee in the stated job.

Needs Improvement (N). Performance in relation to job responsibilities and the demonstration of basic competencies **is less than** normally expected of an employee in the stated job.

Unsatisfactory (U). Performance in relation to job responsibilities and the demonstration of basic competencies **is clearly unacceptable** for an employee in the stated job and immediate improvement is required.

If there are areas of concern (ratings of N or U) in any category or overall rating, the supervisor and employee **must** complete a "Corrective Action Plan" attached as the last page to this evaluation (Section 9.7 2015-2017 NAPE Agreement).

As stated in Section 9.5 2015-2017 NAPE Agreement, only an overall satisfactory or exceeds expectations performance designation is eligible for any negotiated annual increase to base salary, if any.

A. MAJOR JOB RESPONSIBILITIES/DUTIES, AS DETERMINED BY SUPERVISOR AND LISTED ON JOB DESCRIPTION

List at least 3 job responsibilities/duties below:

- 1.
- 2.
- 3.
- 4.
- 5.

F. COMMENTS BY NEXT HIGHER SUPERVISOR: (Must be completed prior to meeting with employee)

If signing this form electronically, I recognize that it will be considered as effective and valid as the original.

Next Higher Supervisor Signature _____

Date _____

G. EMPLOYEE'S STATEMENT: I have reviewed and discussed the contents of this evaluation with my supervisor and understand that my signature does not necessarily indicate agreement. I further understand that I may submit a written rebuttal statement which will be attached to and become a permanent part of this evaluation. I also understand I may write comments where indicated.

Employee's Comments:

Signature _____

Date _____

PLEASE RETURN THIS COMPLETED FORM TO HUMAN RESOURCES
(The original of this evaluation will be placed in the employee's personnel file.)

Supervisor & Employee: Please retain a copy for your files prior to forwarding to Human Resources.